

021031TXR01

Appt. Date: _____

Auth #: _____

NaphCare (National Prison HealthCare)
Hospital/Consultant Referral FormInmate Name: Dackler Debra AIS#: 159516 Date: 10-30-02
DOB: 11-26-54 Race: W Sex: F Allergies: codeine

History of working diagnosis (when first recognized, progression of symptoms, physical findings, lab results, current symptoms, current treatments):

Persistent Bilat mastodynia
in 48 y.o. with H/O nipple discharge -
ultrasonograms reported as benign, but
pt has very dense breasts - so sensitivity
is limited - needs ultrasound

SERVICES REQUESTED/PROVIDER:

Bid Bilateral Breast ultrasound
Guyton Signature (M.D.): _____

Pertinent Chronic Conditions/Diagnosis: _____

DOC Facility: TutwilerReceiving Facility/Hospital: TLC

Time Out: _____

Route of Transportation: (X) _____

Ambulance

DOC Van

Return Time: _____

Date & Result/Last FPD: 9-23-02Date & Result/Last Chest X-Ray: N/A

OFFSITE HEALTHCARE REPORT

Orders/Recommendations: _____

Physician: _____

Notify (Facility): Tutwiler

Date: _____

Time: _____

Advanced Medical Directive: Yes _____

(Attached) No X

of patient's discharge.

Report called to: (Name/Title): N/ASignature & Title: N/A

Date: _____

Date: _____

Appt. Date: 9/23/02 ~~020912TXR01~~ 020912TXR01 Auth # _____

NaphCare (National Prison HealthCare)
Hospital/Consultant Referral Form

Inmate Name: Clackler, Debra AIS#: 159516 Date: 9-10-02
DOB: 11-26-54 Race: W Sex: F Allergies: Codaine

History of working diagnosis (when first recognized, progression of symptoms, physical findings, lab results, current symptoms, current treatments): Recent (R) breast heaviness +
discomfort (2 more Pts) - w/ Pn. Some (R) nipple discharge.
Granular TV. Negative F.H.
Exam: Diffuse Fibrocystic Thickening
Needle mammogram

SERVICES REQUESTED/PROVIDER:

Mammogram
Shelton Signature (M.D.)

Patient's Chronic Condition(s) 10/1/98
DOC Facility Do. J. 11 Date Sent _____
N. 11/11/01 11/11/01 11/11/01 11/11/01 11/11/01
Route of Transportation (X) Ambulance DOC Van Other _____
Date of Referral 5-29-01 X 11/11/01 11/11/01 11/11/01

ORIGINAL REFERRAL REQUEST: _____

Order/Referral/Consultation: _____

Physician: _____ Date: _____ Time: _____

Notify (Facility): Tutwiler at # (1514-0219) of patient's discharge.

Advanced Medical Directive: Yes _____ (Attached) No ✓

Report called to: (Name/Title): N/A Date: _____

Signature & Title: N/A Date: _____

Bill to NaphCare 220 42nd St. N. Suite 640 Birmingham, AL 35203
Sharon Hunter, R.N. Director of Utilization Review 205 483-8370 or 1-800-971-0315

Appt. Date:

9/23/02

Auth #:

6209/2 TXR01

NaphCare (National Prison HealthCare)
Hospital/Consultant Referral Form

Inmate Name:

Clackler, Debra

AIS#:

159516

Date:

9-10-02

DOB:

11-26-54

Race:

W

Sex:

F

Allergies:

Codeine

History of working diagnosis (when first recognized, progression of symptoms, physical findings, lab results, current symptoms, current treatments):

Recent (R) breast heaviness + discomfort (2 weeks) - with some (R) nipple discharge
Breast TV, Negative F.H.
Exam: Diffuse Fibrocytic Thickening
Needs mammogram

SERVICES REQUESTED/PROVIDER:

Mammogram

Signature (M.D.):

Z. Schubert

Pertinent Chronic Conditions/Diagnosis:

None

DOC Facility:

Tutwiler

Time Out:

Receiving Facility/Hospital:

Adv. Medical Imaging

Return Time:

Route of Transportation: (X)

Ambulance

(DOC Van)

Other:

Date & Result/Last PPD:

5-29-01

Date & Result/Last Chest X-Ray:

N/A

OFFSITE HEALTHCARE REPORT:

Orders/Recommendations:

mammo done results to follow

Physician:

Date:

Time:

Notify (Facility):

Tutwiler

at # (

1514-0219

of patient's discharge.

Advanced Medical Directive: Yes

(Attached) No

Report called to: (Name/Title):

N/A

Date:

Signature & Title:

N/A

Date:



LabCorp Birmingham
1801 First Avenue South, Birmingham, AL 35233-0000



Phone: 205-581-3500

SPECIMEN 031-205-5268-0	TYPE S	PRIMARY LAB MB	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION SS#: 417-80-9985				
FASTING: N DOB: 11/26/1954				
PATIENT NAME CLACKLER,DEBRA		SEX F	AGE(YR./MOS.) 51 / 2	
PT. ADD.:				
DATE OF SPECIMEN 1/31/2006	TIME 13:43	DATE RECEIVED 1/31/2006	DATE REPORTED 2/01/2006	TIME 20:06 4592

CLINICAL INFORMATION CD- 41138414815	
PHYSICIAN ID. ENGLEHARDS	PATIENT ID. 159516
ACCOUNT: Tutwiller Prison For Women Prison Health Services 8966 Us Hwy 231 N Wetumpka AL 36092-0000	
ACCOUNT NUMBER: 01309900	

TEST	RESULT	LIMITS	LAB
> H. pylori IgG, Abs	5.8H U/mL	0.0 - 0.8	MB
	Negative	<0.9	
	Indeterminate	0.9 - 1.0	
	Positive	>1.0	

LAB: MB LabCorp Birmingham 1801 First Avenue South, Birmingham, AL 35233-0000	DIRECTOR: John Elgin N MD
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Pat Name: CLACKLER,DEBRA	Pat ID: 159516	Spec #: 031-205-5268-0	Seq #: 4592
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Results are Flagged in Accordance with Age Dependent Reference Ranges
Last Page of Report

PHS0304



LabCorp Montgomery Hull
543 Hull Street, Montgomery, AL 36104-0000

Phone: 334-263-5745



SPECIMEN 311-684-3088-0	TYPE S	PRIMARY LAB YX	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION SS#: 417-80-9985 FASTING: N DOB: 11/26/1954				
PATIENT NAME CLACKLER, DEBRA		SEX F	AGE(YR./MOS.) 50 / 11	
PT. ADD.:				
DATE OF SPECIMEN 11/07/2005	TIME 8:42	DATE RECEIVED 11/07/2005	DATE REPORTED 11/08/2005	TIME 11:33
3072				

CLINICAL INFORMATION CD- 41138413303	
PHYSICIAN ID. WILLIAMS W	PATIENT ID. 159516
ACCOUNT: Tutwiller Prison For Women Prison Health Services 8966 Us Hwy 231 N Wetumpka AL 36092-0000	
ACCOUNT NUMBER: 01309900	

TEST	RESULT	LIMITS	LAB
CMP12+LP+TP+TSH+6AC+CBC/D/Plt			
Chemistries			
Glucose, Serum	85 mg/dL	65 - 99	YX
Uric Acid, Serum	5.6 mg/dL	2.4 - 8.2	YX
BUN	8 mg/dL	5 - 26	YX
Creatinine, Serum	0.8 mg/dL	0.5 - 1.5	YX
BUN/Creatinine Ratio	10	8 - 27	
Sodium, Serum	139 mmol/L	135 - 148	YX
Potassium, Serum	4.0 mmol/L	3.5 - 5.5	YX
Chloride, Serum	105 mmol/L	96 - 109	YX
Calcium, Serum	9.2 mg/dL	8.5 - 10.6	YX
Phosphorus, Serum	3.1 mg/dL	2.5 - 4.5	YX
Protein, Total, Serum	6.8 g/dL	6.0 - 8.5	YX
Albumin, Serum	3.5 g/dL	3.5 - 5.5	YX
Globulin, Total	3.3 g/dL	1.5 - 4.5	
A/G Ratio	1.1	1.1 - 2.5	
Bilirubin, Total	0.3 mg/dL	0.1 - 1.2	YX
Alkaline Phosphatase, Serum	62 IU/L	25 - 150	YX
LDH	175 IU/L	100 - 250	YX
AST (SGOT)	21 IU/L	0 - 40	YX
ALT (SGPT)	17 IU/L	0 - 40	YX
GGT	4 IU/L	0 - 60	YX
Iron, Serum	38 ug/dL	35 - 155	YX
Lipids			
Cholesterol, Total	192 mg/dL	100 - 199	YX
Triglycerides	141 mg/dL	0 - 149	YX
HDL Cholesterol	52 mg/dL	40 - 59	YX
VLDL Cholesterol Calc	28 mg/dL	5 - 40	
> LDL Cholesterol Calc	112 H mg/dL	0 - 99	YX

Comment

If initial LDL-cholesterol result is >100 mg/dL, assess for risk factors.

T. Chol/HDL Ratio 3.7 ratio units 0.0 - 4.4
Estimated CHD Risk 0.6 times avg. 0.0 - 1.0

T. Chol/HDL Ratio

Men Women

1/2 Avg. Risk 3.4 3.3

Avg. Risk 5.0 4.4

2X Avg. Risk 9.6 7.1

11/10/05
(u)

Pat Name: CLACKLER, DEBRA	Pat ID: 159516	Spec #: 311-684-3088-0	Seq #: 3072
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Results are Flagged in Accordance with Age Dependent Reference Ranges

Continued on Next Page

PHS0305



LabCorp Birmingham Cyto Histo
1801 First Avenue South, Birmingham, AL 35233-0000

Phone: 205-581-3500



SPECIMEN 280-C05-3029-0	TYPE S	PRIMARY LAB BA	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION SS#: 417-80-9985 FASTING: N DOB: 11/26/1954				
PATIENT NAME CLACKLER,DEBRA		SEX F	AGE(YR./MOS.) 50 / 10	
PT. ADD.:				
DATE OF SPECIMEN 10/06/2005	TIME 17:40	DATE RECEIVED 10/07/2005	DATE REPORTED 10/11/2005	TIME 15:22
2001				
TEST		RESULT		

CLINICAL INFORMATION CD- 41138412589	
PHYSICIAN ID. ENGLEHARDS	PATIENT ID. 159516
ACCOUNT: Tutwiller Prison For Women Prison Health Services 8966 Us Hwy 231 N Wetumpka AL 36092-0000	
ACCOUNT NUMBER: 01309900	
LIMITS	LAB

Source.....Cervical;Endocervical
LMP / Prev Treat...LMP=092905

Pap Smear (1 Slide), Gyn

Test ordered:

009100 Pap Smear (1 Slide) Gyn

Number of Slides = 1

DIAGNOSIS:

NEGATIVE FOR INTRAEPITHELIAL LESION AND MALIGNANCY.

Specimen adequacy:

Satisfactory for evaluation. Endocervical and/or squamous metaplastic cells (endocervical component) are present.

Performed by:

Mary B Tucker, Cytotechnologist (ASCP)

Comment:

The Pap smear is a screening test designed to aid in the detection of pre-malignant and malignant conditions of the uterine cervix. It is not a diagnostic procedure and should not be used as the sole means of detecting cervical cancer. Both false-positive and false-negative reports do occur.

LAB: BA LabCorp Birmingham Cyto Histo

DIRECTOR: John Elgin N MD

1801 First Avenue South, Birmingham, AL 35233-0000

10-14-05
[Signature]

Pat Name: CLACKLER,DEBRA	Pat ID: 159516	Spec #: 280-C05-3029-0	Seq #: 2001
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Results are Flagged in Accordance with Age Dependent Reference Ranges
Last Page of Report

PHS0306



LabCorp Birmingham

1801 First Avenue South, Birmingham, AL 35233-0000



Phone: 205-581-3500

SPECIMEN 279-205-5153-0	TYPE S	PRIMARY LAB MB	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION				
FASTING: N DOB: 11/26/1954				
PATIENT NAME CLACKLER, DEBRA		SEX F	AGE(YR./MOS.) 50 / 10	
PT. ADD.:				
DATE OF SPECIMEN 10/06/2005	TIME 15:32	DATE RECEIVED 10/06/2005	DATE REPORTED 10/07/2005	TIME 7:21
1877				

CLINICAL INFORMATION CD- 41138412574	
PHYSICIAN ID. WILLIAMS W	PATIENT ID. 159516
ACCOUNT: Tutwiler Prison For Women Prison Health Services 8966 Us Hwy 231 N Wetumpka AL 36092-0000	
ACCOUNT NUMBER: 01309900	

TEST	RESULT	LIMITS	LAB
Urinalysis, Routine			
Urinalysis Gross Exam			
Specific Gravity	1.015	1.005 - 1.030	MB
pH	6.0	5.0 - 7.5	MB
Urine-Color	Yellow	Yellow	MB
Appearance	Clear	Clear	MB
WBC Esterase	Negative	Negative	MB
Protein	Negative	Negative/Trace	MB
Glucose	Negative	Negative	MB
Ketones	Negative	Negative	MB
Occult Blood	Negative	Negative	MB
Bilirubin	Negative	Negative	MB
Urobilinogen, Semi-Qn	0.0 mg/dL	0.0 - 1.9	MB
Nitrite, Urine	Negative	Negative	MB
Microscopic Examination			MB
Microscopic follows if indicated.			MB

LAB: MB LabCorp Birmingham

1801 First Avenue South, Birmingham, AL 35233-0000

DIRECTOR: John Elgin N MD

10/11/05

Pat Name: CLACKLER, DEBRA	Pat ID: 159516	Spec #: 279-205-5153-0	Seq #: 1877
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Results are Flagged in Accordance with Age Dependent Reference Ranges

Last Page of Report

PHS0307



LabCorp Montgomery Hull
543 Hull Street, Montgomery, AL 36104-0000



Phone: 334-263-5745

SPECIMEN 279-684-3339-0	TYPE S	PRIMARY LAB YX	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION				
SRC:UR		FASTING: N DOB: 11/26/1954		
PATIENT NAME CLACKLER,DEBRA		SEX F	AGE(YR./MOS.) 50 / 10	
PT. ADD.:				
DATE OF SPECIMEN 10/06/2005	TIME 15:32	DATE RECEIVED 10/06/2005	DATE REPORTED 10/08/2005	TIME 11:16
1920				

CLINICAL INFORMATION CD- 41138412574	
PHYSICIAN ID. WILLIAMS W	PATIENT ID. 159516
ACCOUNT: Tutwiller Prison For Women Prison Health Services 8966 Us Hwy 231 N Wetumpka AL 36092-0000	
ACCOUNT NUMBER: 01309900	

TEST	RESULT	LIMITS	LAB
Urine Culture, Routine	Final report		YX
Result 1	No growth		YX

LAB: YX LabCorp Montgomery Hull
543 Hull Street, Montgomery, AL 36104-0000

DIRECTOR: Alton Sturtevant B PhD

10/10/05

Pat Name: CLACKLER,DEBRA	Pat ID: 159516	Spec #: 279-684-3339-0	Seq #: 1920
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Results are Flagged in Accordance with Age Dependent Reference Ranges
Last Page of Report

PHS0308



LabCorp Montgomery Hull
543 Hull Street, Montgomery, AL 36104-0000



Phone: 334-263-5745

SPECIMEN 280-684-3171-0	TYPE S	PRIMARY LAB YX	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION SS#: 417-80-9985 SRC:CE FASTING: N DOB: 11/26/1954				
PATIENT NAME CLACKLER,DEBRA		SEX F	AGE(YR./MOS.) 50 / 10	
PT. ADD.:				
DATE OF SPECIMEN 10/06/2005	TIME 17:41	DATE RECEIVED 10/07/2005	DATE REPORTED 10/10/2005	TIME 15:16
1944				
CLINICAL INFORMATION CD- 41138412590 PHYSICIAN ID. ENGLEHARDS PATIENT ID. 159516 ACCOUNT: Tutwiller Prison For Women Prison Health Services 8966 Us Hwy 231 N Wetumpka AL 36092-0000 ACCOUNT NUMBER: 01309900				
TEST		RESULT		LIMITS
Chlamydia/GC, DNA Probe		Negative		MB
Chlamydia, DNA Probe		Negative		MB
N gonorrhoeae, DNA Probe		Negative		MB
Test valid for male urethral and female endocervical specimens only.				

LAB: MB LabCorp Birmingham DIRECTOR: John Elgin N MD
1801 First Avenue South, Birmingham, AL 35233-0000

AE
10-11-05

Pat Name: CLACKLER,DEBRA	Pat ID: 159516	Spec #: 280-684-3171-0	Seq #: 1944
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Results are Flagged in Accordance with Age Dependent Reference Ranges
Last Page of Report

PHS0309



LabCorp Birmingham
1801 First Avenue South, Birmingham, AL 35233-0000



Phone: 205-581-3500

SPECIMEN 251-205-5193-0	TYPE S	PRIMARY LAB MB	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION				
FASTING: N DOB: 11/26/1954				
PATIENT NAME CLACKLER, DEBRA		SEX F	AGE (YR./MOS.) 50 / 9	
PT. ADD.:				
DATE OF SPECIMEN 9/08/2005	TIME 8:44	DATE RECEIVED 9/08/2005	DATE REPORTED 9/09/2005	TIME 7:22
1188				
TEST				
RESULT				
LIMITS				
LAB				

CLINICAL INFORMATION CD- 41138411964	
PHYSICIAN ID. WILLIAMS W	PATIENT ID. 159516
ACCOUNT: Tutwiller Prison For Women Prison Health Services 8966 Us Hwy 231 N Wetumpka AL 36092-0000	
ACCOUNT NUMBER: 01309900	

CMP12+LP+TP+TSH+6AC+CBC/D/Plt

Chemistries

	Glucose, Serum	94	mg/dL	65 - 99	MB
	Uric Acid, Serum	5.0	mg/dL	2.4 - 8.2	MB
	BUN	6	mg/dL	5 - 26	MB
	Creatinine, Serum	0.9	mg/dL	0.5 - 1.5	MB
>	BUN/Creatinine Ratio	7 L		8 - 27	
	Sodium, Serum	140	mmol/L	135 - 148	MB
	Potassium, Serum	3.5	mmol/L	3.5 - 5.5	MB
	Chloride, Serum	104	mmol/L	96 - 109	MB
	Calcium, Serum	9.3	mg/dL	8.5 - 10.6	MB
>	Phosphorus, Serum	2.4 L	mg/dL	2.5 - 4.5	MB
	Protein, Total, Serum	6.9	g/dL	6.0 - 8.5	MB
	Albumin, Serum	4.1	g/dL	3.5 - 5.5	MB
	Globulin, Total	2.8	g/dL	1.5 - 4.5	
	A/G Ratio	1.5		1.1 - 2.5	
	Bilirubin, Total	0.4	mg/dL	0.1 - 1.2	MB
	Alkaline Phosphatase, Serum	67	IU/L	25 - 150	MB
	LDH	171	IU/L	100 - 250	MB
	AST (SGOT)	14	IU/L	0 - 40	MB
	ALT (SGPT)	5	IU/L	0 - 40	MB
	GGT	7	IU/L	0 - 60	MB
	Iron, Serum	49	ug/dL	35 - 155	MB
					MB
					MB
	Lipids				
	Cholesterol, Total	188	mg/dL	100 - 199	MB
	Triglycerides	124	mg/dL	0 - 149	MB
	HDL Cholesterol	45	mg/dL	40 - 59	MB
	VLDL Cholesterol Cal	25	mg/dL	5 - 40	
>	LDL Cholesterol Calc	118 H	mg/dL	0 - 99	

Comment

If initial LDL-cholesterol result is >100 mg/dL, assess for risk factors and refer to the ATP-III table below.

Risk Category LDL Goal LDL Level (mg/dL) LDL Level (mg/dL)
mg/dL at which to initiate at which to
Therapeutic Lifestyle consider Drug
Changes (TLC) Therapy

CHD <100 >100 >or=130

Pat Name: CLACKLER, DEBRA	Pat ID: 159516	Spec #: 251-205-5193-0	Seq #: 1188
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Results are Flagged in Accordance with Age Dependent Reference Ranges

Continued on Next Page

PHS0310



PRISON
HEALTH
SERVICES
INCORPORATED

DEPARTMENT OF CORRECTIONS

DATE: _____

DATE: 6/9/05

URINALYSIS

LEUKOCYTES TraceNITRITE NegUROBILINOGEN NormalPROTEIN NegpH 8.0BLOOD NegSPEC. GRAVITY 1.005KETONE NegGLUCOSE Normal

HCG _____

(Add: Final Labs Here)

INMATE NAME (LAST, FIRST, MIDDLE)

Clarkson, Debra

DOC #

159376

DOB

11/24/54

RACE/SEX

W (f)

FAC.

JTP



PRISON
HEALTH
SERVICES
INCORPORATED

DEPARTMENT OF CORRECTIONS

DATE: 4/4/05

URINALYSIS

LEUKOCYTES neg
 NITRITE neg
 UROBILINOGEN normal
 PROTEIN neg
 pH 5

BLOOD trace
 SPEC. GRAVITY 1.025
 KETONE neg
 GLUCOSE normal
 HCG _____

(Add: Final Labs Here)

INMATE NAME (LAST, FIRST, MIDDLE)	DOC #	DOB	RACE/SEX	FAC.
Clackler, Lebra	159516	11/26/54	w/f	Tut

LABORATORY REPORTS

Laboratory Corporation of America

SPECIMEN 246-684-3387-0	TYPE S	PRIMARY LAB YX	REPORT STATUS COMPLETE	Page #: 1
ADDITIONAL INFORMATION				
SRC:URIN		FASTING: N DOB: 11/26/1954		
PATIENT NAME CLACKLER,DEBRA		SEX F	AGE(YR./MOS.) 49 / 9	
PT. ADD.:				
DATE OF SPECIMEN 9/02/2004	TIME 12:35	DATE RECEIVED 9/02/2004	DATE REPORTED 9/04/2004	TIME 13:11 4359

CLINICAL INFORMATION CD- 41138405215	
PHYSICIAN ID. ENGLEHARDS	PATIENT ID. 159516
ACCOUNT: TUTWILLER PRISON FOR WOMEN PRISON HEALTH SERVICES 8966 Us Hwy 231 N Wetumpka AL 36092-0000 ACCOUNT NUMBER: 01309900	

TEST	RESULT	LIMITS	LAB
Urine Culture, Routine	Final report		YX
Result 1			YX
Beta hemolytic Streptococcus, group B			
<u>Penicillin continues to be the drug of choice for infections caused by beta hemolytic streptococci in groups A,B,C and G. No penicillin resistance has been described among these organisms and surveillance for emerging resistance is not recommended. (Sahm, DF. Clinical Microbiology Newsletter, Jan. 1994; Gordon, KA, et al. Diagnostic Microbiology and Infectious Disease, June, 2002.)</u>			
<u>Greater than 100,000 colony forming units per mL</u>			

LAB: YX LabCorp Montgomery Hull
543 Hull Street, Montgomery, AL 36104-0000

DIRECTOR: Alton Sturtevant B PhD

Results are Flagged in Accordance with Age Dependent Reference Ranges
Last Page of Report

PHS0313



Laboratory Corporation of America

SPECIMEN 246-205-5250-0	TYPE S	PRIMARY LAB MB	REPORT STATUS COMPLETE	Page #: 1	
ADDITIONAL INFORMATION					
SRC:URIN		FASTING: N DOB: 11/26/1954			
PATIENT NAME CLACKLER,DEBRA		SEX F	AGE(YR./MOS.) 49 / 9		
PT. ADD.:					
DATE OF SPECIMEN 9/02/2004	TIME 12:35	DATE RECEIVED 9/02/2004	DATE REPORTED 9/03/2004	TIME 7:20	4326

CLINICAL INFORMATION CD- 41138405215	
PHYSICIAN ID. ENGLEHARDS	PATIENT ID. 159516
ACCOUNT: TUTWILLER PRISON FOR WOMEN PRISON HEALTH SERVICES 8966 Us Hwy 231 N Wetumpka AL 36092-0000	
ACCOUNT NUMBER: 01309900	

TEST	RESULT	LIMITS	LAB
Amylase, Serum	66 U/L	0 - 99	MB
Lipase, Serum	34 U/L	0 - 59	MB

LAB: MB LabCorp Birmingham
1801 First Avenue South, Birmingham, AL 35233-0000

DIRECTOR: Arthur Kelly G MD

OK
[Signature]

Results are Flagged in Accordance with Age Dependent Reference Ranges
Last Page of Report

PHS0314



DEPARTMENT OF CORRECTIONS

DATE: 4-26-04

URINALYSIS

LEUKOCYTES Neg
 NITRITE Neg
 UROBILINOGEN Normal
 PROTEIN Neg
 pH 8

BLOOD Neg
 SPEC. GRAVITY 1.005
 KETONE Neg
 GLUCOSE Normal
 HCG _____

(Add: Final Labs Here)

OK *EJL*

INMATE NAME (LAST, FIRST, MIDDLE)	DOC #	DOB	RACE/SEX	FAC.
Clicker Debra	1595K	11-26-54	W/F	FU

7186924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics®

MICROFILM# 10100335799

PATIENT NAME CLACKLER, DEBRA		PATIENT ID 159516		ROOM NO.	AGE	SEX F	PHYSICIAN ENGLEHARDT	
PAGE 1	REQUISITION NO. 3353771	ACCESSION NO. AT258061R	LAB REF. #	COLLECTION DATE & TIME 10082003 11:50 AM		LOG-IN DATE 10092003	REPORT DATE 0152003	& TIME 2:24PM

REMARKS

LMP NG; RISK N; 1SLIDE; PREV PAP NG

EASTERN
TIME

REPORT STATUS FINAL

TEST

RESULT

IN RANGE

OUT OF RANGE

UNITS

REFERENCE
RANGE

SITE
CODE

Date of Birth: NG

A COPY OF THIS REPORT HAS BEEN SENT TO: NAPHCARE INC

950 22ND ST N STE 825

BIRMINGHAM, AL 35203-5300

DEPT ID NUMBER: DA03789637

PAP 1 SLIDE

SOURCE:

CERVICAL

DKW

SPECIMEN ADEQUACY:

SATISFACTORY FOR EVALUATION,
LACK OF AGE AND/OR MENSTRUAL STATUS.

SATISFACTORY FOR EVALUATION,
ENDOCERVICAL/TRANSFORMATION ZONE
COMPONENT PRESENT.

GENERAL CATEGORY:

NEGATIVE FOR INTRAEPITHELIAL LESION
OR MALIGNANCY.

NARRATIVE DESCRIPTION:

NEGATIVE FOR INTRAEPITHELIAL LESION
OR MALIGNANCY.

CYTOTECHNOLOGIST:

CTZEAF

* Reference footnote #1

Footnote 1

GYNECOLOGICAL CYTOLOGY IS A SCREENING PROCEDURE
SUBJECT TO BOTH FALSE NEGATIVE AND FALSE POSITIVE
RESULTS. IT IS MOST RELIABLE WHEN A SATISFACTORY
SAMPLE IS OBTAINED ON A REGULAR REPETITIVE BASIS.
RESULTS MUST BE INTERPRETED IN THE CONTEXT OF
HISTORIC AND CURRENT CLINICAL INFORMATION.

>> REPORT CONTINUED ON NEXT PAGE - CLACKLER, DEBRA AT258061R <<

PHS0316

RECEIVED OCT 15 2003

7186924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics®

MICROFILM# 10100335799

PATIENT NAME CLACKLER, DEBRA		PATIENT ID 159516		ROOM NO.	AGE	SEX F	PHYSICIAN ENGLEHARDT	
PAGE 2	REQUISITION NO. 3353771	ACCESSION NO. AT258061R	LAB REF. #	COLLECTION DATE & TIME 10082003 11:50 AM		LOG-IN DATE 10092003	REPORT DATE 10152003	& TIME 2:24PM

REMARKS
LMP NG; RISK N; 1SLIDE; PREV PAP NG

EASTERN
TIME

REPORT STATUS FINAL

TEST

RESULT

IN RANGE OUT OF RANGE

UNITS

REFERENCE
RANGE

SITE
CODE

Date of Birth: NG

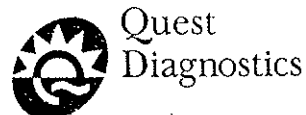
Performing Site Code Key (continued from the back):

DKW DUCKWORTH PATHOLOGY
220 S. CLAYBROOK STREET
SUITE 401
MEMPHIS, TN 38104
901-276-9192
CLIA: 44D0913215

>> END OF REPORT - CLACKLER, DEBRA AT258061R <<

PHS0317

7186924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



PATIENT NAME CLACKLER, DEBRA		PATIENT ID 159516		ROOM NO.	AGE	SEX	PHYSICIAN ENGLEHARDT	
PAGE 1	REQUISITION NO. 2754859	ACCESSION NO. AT617325Q	LAB REF. #	COLLECTION DATE & TIME 09122003 10:30 AM		LOG-IN DATE 09122003	REPORT DATE 09152003	& TIME 4:39AM

REMARKS

EASTERN
TIME

REPORT STATUS FINAL

TEST

RESULT

IN RANGE OUT OF RANGE

UNITS

REFERENCE
RANGESITE
CODE

Date of Birth: NG

A COPY OF THIS REPORT HAS BEEN SENT TO: NAPHCARE INC
950 22ND ST N STE 825
BIRMINGHAM, AL 35203-5300

BASIC METABOLIC PANEL

AT

GLUCOSE

90

MG/DL

65-109

FASTING REFERENCE INTERVAL

UREA NITROGEN (BUN)

5 L

MG/DL

7-25

CREATININE

1.0

MG/DL

0.5-1.4

BUN/CREATININE RATIO

5 L

(CALC)

6-25

SODIUM

141

MMOL/L

135-146

POTASSIUM

3.7

MMOL/L

3.5-5.3

CHLORIDE

108

MMOL/L

98-110

CARBON DIOXIDE

22

MMOL/L

21-33

CALCIUM

9.6

MG/DL

8.5-10.4

CBC (INCLUDES DIFF/PLT)

AT

WHITE BLOOD CELL COUNT

7.3

THOUS/MCL

3.8-10.8

RED BLOOD CELL COUNT

4.27

MILL/MCL

4.20-5.10

HEMOGLOBIN

11.8 L

G/DL

13.2-15.5

HEMATOCRIT

34.5 L

%

38.5-45.0

MCV

80.6

FL

80.0-100.0

MCH

27.6

PG

27.0-33.0

MCHC

34.2

G/DL

32.0-36.0

RDW

20.4 H

%

11.0-15.0

PLATELET COUNT

299

THOUS/MCL

140-400

ABSOLUTE NEUTROPHILS

4417

CELLS/MCL

1500-7800

ABSOLUTE LYMPHOCYTES

2526

CELLS/MCL

850-3900

ABSOLUTE MONOCYTES

329

CELLS/MCL

200-950

ABSOLUTE EOSINOPHILS

22

CELLS/MCL

15-500

ABSOLUTE BASOPHILS

7

CELLS/MCL

0-200

NEUTROPHILS

60.5

%

LYMPHOCYTES

34.6

%

MONOCYTES

4.5

%

EOSINOPHILS

0.3

%

BASOPHILS

0.1

%

PHS0318

* COMMENT(S)

REVIEW OF PERIPHERAL SMEAR CONFIRMS
AUTOMATED RESULTS

RECEIVED SEP 17 2003

>> REPORT CONTINUED ON NEXT PAGE - CLACKLER, DEBRA AT617325Q <<

LABORATORY REPORT

7106924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics

PATIENT NAME CLACKLER, DEBRA		PATIENT ID 159516		ROOM NO.	AGE	SEX	PHYSICIAN ENGLEHARDT
PAGE 1	REQUISITION NO. 2754586	ACCESSION NO. AT671810P	LAB REF. #	COLLECTION DATE & TIME 08052003 12:15 PM	LOG-IN DATE 08052003	REPORT DATE 08062003	& TIME 7:52AM
REMARKS							

EASTERN
TIME

REPORT STATUS

ETNAI

-ST

RESULT

IN RANGE

OUT OF RANGE

UNITS

REFERENCE
RANGESITE
CODE

Date of Birth: NG

A COPY OF THIS REPORT HAS BEEN

SENT TO: NAPHCARE INC

950 22ND ST N STE 825

BIRMINGHAM, AL 35203-5300

COMPREHENSIVE METABOLIC

PANEL

GLUCOSE

94

MG/DL

65-109

AT

UREA NITROGEN (BUN)

9

FASTING REFERENCE INTERVAL

CREATININE

1.0

MG/DL

7-25

BUN/CREATININE RATIO

9

MG/DL

0.5-1.4

SODIUM

141

(CALC)

6-25

POTASSIUM

3.6

MMOL/L

135-146

CHLORIDE

105

MMOL/L

3.5-5.3

CARBON DIOXIDE

25

MMOL

98-110

CALCIUM

8.7

MG/DL

21-33

PROTEIN, TOTAL

7.0

G/DL

8.5-10.4

ALBUMIN

4.1

G/DL

6.0-8.3

GLOBULIN

2.9

G/DL (CALC)

3.2-5.1

ALBUMIN/GLOBULIN RATIO

1.4

(CALC)

2-4.2

BILIRUBIN, TOTAL

0.4

MG/DL

0-2.0

ALKALINE PHOSPHATASE

68

U/L

20-55

AST

32

U/L

2-50

ALT

27

U/L

2-60

CBC (INCLUDES DIFF/PLT)

WHITE BLOOD CELL COUNT

8.7

THOUS/MCL

3.8-10.8

AT

RED BLOOD CELL COUNT

4.01 L

MILL/MCL

4.20-5.10

HEMOGLOBIN

10.3 L

G/DL

13.2-15.5

HEMATOCRIT

31.4 L

%

38.5-45.0

MCV

78.1 L

FL

80.0-100.0

MCH

25.7 L

PG

27.0-33.0

MCHC

32.9

G/DL

32.0-36.0

RDW

15.3 H

%

11.0-15.0

PLATELET COUNT

412 H

THOUS/MCL

140-400

ABSOLUTE NEUTROPHILS

5873

CELLS/MCL

1500-7800

ABSOLUTE LYMPHOCYTES

2306

CELLS/MCL

850-3900

ABSOLUTE MONOCYTES

400

CELLS/MCL

200-950

ABSOLUTE EOSINOPHILS

104

CELLS/MCL

15-500

ABSOLUTE BASOPHILS

17

CELLS/MCL

0-200

>> REPORT CONTINUED ON NEXT PAGE - CLACKLER, DEBRA AT671810P <<

RECEIVED AUG 16 2003

7186924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics

PATIENT NAME CLACKLER, DEBRA			PATIENT ID 159516		ROOM NO.	AGE	SEX	PHYSICIAN ENGLEHARDT	
PAGE 2	REQUISITION NO. 2754586	ACCESSION NO. AT671810F	LAB REF. #	COLLECTION DATE & TIME 08052003 12:15 PM		LOG-IN-DATE 08052003		REPORT DATE 08062003	& TIME 7:52AM

REMARKS

EASTERN
TIME

REPORT STATUS	TEST	RESULT		UNITS	REFERENCE RANGE	SITE CODE
		IN RANGE	OUT OF RANGE			

Date of Birth: NG

CBC (INCLUDES DIFF/PLT) (CONTINUED)

NEUTROPHILS	67.5	%
LYMPHOCYTES	26.5	%
MONOCYTES	4.6	%
EOSINOPHILS	1.2	%
BASOPHILS	0.2	%

>> END OF REPORT - CLACKLER, DEBRA AT671810F <<

PHS0320

7186924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics

PATIENT NAME CLACKLER, DEBRA		PATIENT ID 159516		ROOM NO.	AGE 48	SEX F	PHYSICIAN LYRENE, GEORGE A	
PAGE 1	REQUISITION NO. 0793792	ACCESSION NO. AT829631N	LAB REF. #	COLLECTION DATE & TIME 06292003 1:10 PM	LOG-IN-DATE 06302003	REPORT DATE 07012003	& TIME 4:49AM	
REMARKS								

EASTERN
TIME

REPORT STATUS	TEST	RESULT		UNITS	REFERENCE RANGE	SITE CODE
		IN RANGE	OUT OF RANGE			

Date of Birth: 11/26/1954

A COPY OF THIS REPORT HAS BEEN SENT TO: NAPHCARE INC
950 22ND ST N STE 825
BIRMINGHAM, AL 35203-5300

HEPATIC FUNCTION PANEL

PROTEIN, TOTAL	6.6	G/DL	6.0-8.3	AT
ALBUMIN	4.1	G/DL	3.5-4.9	
GLOBULIN	2.5	G/DL (CALC)	2.2-4.2	
ALBUMIN/GLOBULIN RATIO	1.6	(CALC)	0.8-2.0	
BILIRUBIN, TOTAL	0.3	MG/DL	0.2-1.3	
BILIRUBIN, DIRECT	0.0	MG/DL	0.0-0.3	
BILIRUBIN, INDIRECT	0.3	MG/DL (CALC)	0.0-1.3	
ALKALINE PHOSPHATASE	58	U/L	20-125	
AST	20	U/L	2-35	
ALT	19	U/L	2-40	

>> END OF REPORT - CLACKLER, DEBRA AT829631N <<

RECEIVED JUL 03 2003

JR, Jr

PHS0321

AFB SMEAR		ALABAMA DEPARTMENT OF PUBLIC HEALTH BUREAU OF CLINICAL LABORATORIES		State	
87206		8149 AM DRIVE, P.O. BOX 24019, MONTICOMERY, ALABAMA 36122-0199		Montgomery, Alabama, 9	
Name: Last	First	Middle		Initial	
Clacker	D	ethel			
County Health Dept.	CHR Number	Date of Birth	MM	DD	YY
		11/26/54			
Medicaid Number		Sex	F	Race	W
		MM	DD	YY	
Social Security Number		Date Collected	10/5/08	10/3	
Specimen submitted:	<input type="checkbox"/> Sputum	<input type="checkbox"/> Culture Identification	<input type="checkbox"/> Inoc. Media		
<input type="checkbox"/> Bronchial Wash	<input type="checkbox"/> CSF				
<input type="checkbox"/> Other:					
If private insurance available, send copy of card.		Patient's Resident County			
Mail Report to:		Tutwiler Prison			
ADPH-F-CI-412 AND 413 required with all specimens and cultures		Specimen Label			
ADPH-F-BCL-413/REV. 3-00		Provider Number			
Results of Acid fast bacilli		Results of Fungal culture			
No growth		No growth			
Moderate		Moderate			
Heavy		Heavy			
Trace		Trace			
No growth		No growth			
Moderate		Moderate			
Heavy		Heavy			
Trace		Trace			
No growth		No growth			
Moderate		Moderate			
Heavy		Heavy			
Trace		Trace			
No growth		No growth			
Moderate		Moderate			
Heavy		Heavy			
Trace		Trace			
No growth		No growth			
Moderate		Moderate			
Heavy		Heavy			
Trace		Trace			
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Moderate		Moderate			
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Trace		Trace			
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Moderate		Moderate			
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No growth		No growth			
Moderate		Moderate			
Heavy		Heavy			
Trace		Trace			

RECEIVED MAY 16 2009

5-18

PHS0322

RECEIVED APR 26 2009

7186924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics

PATIENT NAME CLACKLER, DEBRA		PATIENT ID 159516		ROOM NO.	AGE NG	SEX F	PHYSICIAN TUTWILER PRISON FOR	
PAGE 1	REQUISITION NO. 0563691	ACCESSION NO. AT190626M	LAB REF. #	COLLECTION DATE & TIME 04212003 9:00 AM		LOG-IN-DATE 04222003	REPORT DATE 04222003	& TIME 4:37AM

REMARKS

ENGLEHARDT

EASTERN

TIME

FASTING: U

REPORT STATUS	TEST	RESULT	UNITS	REFERENCE RANGE	SITE CODE
		IN RANGE	OUT OF RANGE		

Date of Birth: NG

A COPY OF THIS REPORT HAS BEEN SENT TO: NAPHCARE INC
950 22ND ST N STE 825
BIRMINGHAM, AL 35203-5300

HEPATIC FUNCTION PANEL

PROTEIN, TOTAL	7.2	G/DL	6.0-8.3
ALBUMIN	4.3	G/DL	3.2-5.1
GLOBULIN	2.9	G/DL (CALC)	2.2-4.2
ALBUMIN/GLOBULIN RATIO	1.5	(CALC)	0.8-2.0
BILIRUBIN, TOTAL	0.4	MG/DL	0.2-1.3
BILIRUBIN, DIRECT	0.1	MG/DL	0.0-0.3
BILIRUBIN, INDIRECT	0.3	MG/DL (CALC)	0.0-1.3
ALKALINE PHOSPHATASE	64	U/L	20-125
AST	17	U/L	2-35
ALT	12	U/L	2-40

AT

>> END OF REPORT - CLACKLER, DEBRA AT190626M <<

PHS0324

RECEIVED APR 22 2003

LABORATORY REPORT

7186924 AREA/ROUTE/STOP: QBHNO11
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics

MICROFILM# 01280375156

PATIENT NAME CLACKER, DEBRA		PATIENT ID 159516		ROOM NO.	AGE NG	SEX	PHYSICIAN LYRENE, GEORGE A	
PAGE 1	REQUISITION NO. 0530841	ACCESSION NO. AT160646K	LAB REF. #	COLLECTION DATE & TIME 01272003 10:20 AM		LOG-IN DATE 01282003	REPORT DATE 01292003	& TIME 12:05PM

REMARKS

EASTERN
TIME

REPORT STATUS	TEST	RESULT		UNITS	REFERENCE RANGE	SITE CODE
		IN RANGE	OUT OF RANGE			

Date of Birth: NG

A COPY OF THIS REPORT HAS BEEN SENT TO: NAPHCARE INC
950 22ND ST N STE 825
BIRMINGHAM, AL 35203-5300

AST	16	U/L	2-50	AT
-----	----	-----	------	----

>> END OF REPORT - CLACKER, DEBRA AT160646K <<

PHS0325

J. Ryman, MD
1/29/03

7186924 AREA/ROUTE/STOP: Q8HM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



Quest
Diagnostics

MICROFILM 12260276884

PATIENT NAME CLACKLER, DEBRA			PATIENT ID 159516		ROOM NO.	AGE 48	SEX F	PHYSICIAN ENGLEHARDT	
PAGE 1	REQUISITION NO. 6972645	ACCESSION NO. AT425165J	LAB REF. #	COLLECTION DATE & TIME 12192002 9:35 AM		LOG-IN DATE 12202002		REPORT DATE 12302002	& TIME 7:54AM

REMARKS

EASTERN
TIME

REPORT STATUS	TEST	RESULT		UNITS	REFERENCE RANGE	SITE CODE
		IN RANGE	OUT OF RANGE			

Date of Birth: 11/26/1954

A COPY OF THIS REPORT HAS BEEN SENT TO: NAPHCARE INC
950 22ND ST N STE 025
BIRMINGHAM, AL 35203-5300

DEPT ID NUMBER: DA02005842

PAP 1 SLIDE

SOURCE:

CERVICAL

SPECIMEN ADEQUACY:

SATISFACTORY FOR EVALUATION BUT
LIMITED BY LACK OF AGE OR MENSTRUAL
STATUS.

GENERAL CATEGORY:

OTHER (SEE NARRATIVE DESCRIPTION)

NARRATIVE DESCRIPTION:

REACTIVE CELLULAR CHANGES ASSOCIATED
WITH INFLAMMATION.

COMMENTS:

REACTIVE ENDOCERVICAL CELLS ARE NOTED

CYTOTECHNOLOGIST:

CTZNLD

PATHOLOGIST:

DARSHANAM N. JHALA, MD - ELEC SIGNATURE

* Reference footnote #1

>> REPORT CONTINUED ON NEXT PAGE - CLACKLER, DEBRA AT425165J <<

PHS0326

COLLECTED REPORT

7166924 AREA/ROUTE/STOP: QBHM011
TUTWILER PRISON FOR WOMEN
8966 US HIGHWAY 231
WETUMPKA, AL 36092-5343



MICROFILM 12260276884

PATIENT NAME CLACKLER, DEBRA		PATIENT ID 155516		ROOM NO.	AGE 48	SEX F	PHYSICIAN ENGLEHARDT	
PAGE 2	REQUISITION NO. 6972645	ACCESSION NO. AT425165J	LAB REF. #	COLLECTION DATE & TIME 12192002 9:35 AM		LOG-IN-DATE 12202002	REPORT DATE 12302002	& TIME 7:54AM
REMARKS								

EASTERN
TIME

REPORT STATUS

ETN01

TEST

RESULT

IN RANGE

OUT OF RANGE

UNITS

REFERENCE
RANGESITE
CODE

Date of Birth: 11/26/1954

Footnote 1

GYNECOLOGICAL CYTOLOGY IS A SCREENING PROCEDURE
SUBJECT TO BOTH FALSE NEGATIVE AND FALSE POSITIVE
RESULTS. IT IS MOST RELIABLE WHEN A SATISFACTORY
SAMPLE IS OBTAINED ON A REGULAR REPETITIVE BASIS.
RESULTS MUST BE INTERPRETED IN THE CONTEXT OF
HISTORIC AND CURRENT CLINICAL INFORMATION.

Performing Site Code Key (continued from the back):

UAB UNIVERSITY OF ALABAMA AT BIRMINGHAM
UNIVERSITY HOSPITAL
619 S. 19TH ST
BIRMINGHAM, AL 35233
(205) 975-2987
CLIA: 0100678593

>> END OF REPORT - CLACKLER, DEBRA AT425165J <<

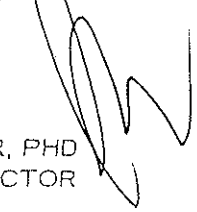
PHS0327

Mt. Meigs, AL 36057

Patient Name
Clacker, Debra
AIS Number
159516
Date Submitted
10-12-01

Tut 39

TEST NAME	RESULT	REFERENCE RANGE	COMMENTS
HIV ANTIBODY	✓ NR	NEGATIVE (NEG)	
RPR	✓ NR	NON-REACTIVE (NR)	
URINALYSIS			
APPEARANCE			
ph		ph5-ph6	
PROTEIN		NEGATIVE (NEG)	
GLUCOSE		NEGATIVE (NEG)	
KETONES		NEGATIVE (NEG)	
BILIRUBIN		NEGATIVE (NEG)	
BLOOD		< 5 RBC/MCL	
NITRITE		NEGATIVE (NEG)	
UROBILINOGEN		<1.0 MG/DL	
LEUK. ESTERASE		NEGATIVE (NEG)	
SPECIFIC GRAVITY		1.016-1.022	

10/25/01

WAYNE D. MERCER, PHD
LAB DIRECTOR

PHS0328

U/A DIPSTICK REPORT

NAME Chaplin, Debra A/S 59 S 16 R/S WFDOB AGE COLLECTION DATE TIME ANNUAL PHYSICAL INITIAL SCREENING RANDOM DAILY REPEAT AFTER RX COMPLETION CHRONIC CARE URINE APPEARANCE: COLOR Pale yellow CLARITY clear ODOR + (-)SPECIFIC GRAVITY: 1.000 1.005 1.010 1.015 1.020 1.025 1.0360PH 5 6 7 8 9 PREG. TEST + (-)LEUKOCYTES: NEG TRACENITRITE: NEG POSPROTEIN: NEG TRACEGLUCOSE NORMAL 50 100 250 500 1000KETONES NEG SMALL MODERATE LARGEUROBILINOGEN NORMAL 1 4 8 12BILIRUBIN NEG + ++ +++BLOOD NEG TRACEHEMOGLOBIN TRACE 50 250WNL: ABNORMAL:

NURSES

SIGNATURE DATE REVIEWING PHYSICIAN DATE 10/2/01

U/A DIPSTICK REF RT

Name Clackner Debra AIS 159516 R/S DOB 11-26-54 AGE 45Collection Date 3-25-00 TIME Annual Physical ☒ Initial Screening Random Daily Repeat After Rx Completion Chronic Care Urine Appearance: Color yellow Clarity Clear Odor + (-)Specific Gravity: 1.000 1.005 1.010 1.015 1.020 1.025 1.030PH: 5 6 7 8 9LEUKOCYTES: Neg Trace + ++NITRITE: Neg PosPROTEIN: Neg Trace +30 ++100 +++300GLUCOSE: Normal 50 100 250 500 1000KETONES: Neg Small Moderate LargeUROBILINOGEN: Normal 1 4 8 12BILIRUBIN: Neg + ++ +++BLOOD: Neg trace 50 250

HEMOGLOBIN: Trace 50 250

PHS0330

WNL: ABNORMAL: NURSES SIGNATURE: [Signature] DATE 3-25-00REVIEWING PHYSICIAN [Signature] DATE 5/9/00

LabCorp®

05/01/00 02:40

112	000	0547	3	Type	0	Prim.	1	Report	FINAL	PC	1	03	01
Additional Information													
CO PAC200044000													
Patient Name								Sex		Age (Yr/Mos)			
DEACKER, DEBRA								F					
Patient Address													
Date Collected				Date Entered				Date Reported				0420	
04/17/00				04/21/00				05/01/00					

Clinical Information	
Physician ID	LUKE
Patient ID	100510
Account	
TUTWILER PRISON FOR WOMEN 01303	
CORRECTION MEDICAL SERVICES 03	
0000 U.S. HIGHWAY 231 03	
WETUMPKA, AL 36002	
334 507 6213 ALY	

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
-------	--------	------	-------	--------------------	-----

TEST ORDERED:
GYNECOLOGICAL SMEAR (1 SLIDE)
Number of Slides = 1

SOURCE:
VAGINAL, CERVICAL & ENDOCERVICAL SMEAR
BRUSH/SPATULA

CLINICAL HISTORY:
LMP: NONE

XX
DIAGNOSTIC:
WITHIN NORMAL LIMITS.

SPECIMEN ADEQUACY:
SATISFACTORY FOR DIAGNOSTIC EVALUATION. ENDOCERVICAL COMPONENT IS
PRESENT.

XX

PERFORMED BY:
RENÉE D. HUFFMAN, CT(ASCP)

PAP SMEAR (1 SLIDE), CYH

THE PAP SMEAR IS A SCREENING TEST DESIGNED TO AID IN THE DETECTION
OF PREMALIGNANT AND MALIGNANT CONDITIONS OF THE UTERINE CERVIX. IT
IS NOT A DIAGNOSTIC PROCEDURE AND SHOULD NOT BE USED AS THE SOLE
MEANS OF DETECTING CERVICAL CANCER. BOTH FALSE POSITIVE AND FALSE
NEGATIVE REPORTS DO OCCUR.

LAB: DA LABCORP BIRMINGHAM DIRECTOR: CONTACT LABORATORY
1001 FIRST AVENUE SOUTH BIRMINGHAM, AL 35203 0000

LAB: JO LABCORP JACKSON DIRECTOR: WEYMOUTH CROWELL MD
1035 LAKELAND DRIVE JACKSON, MS 39210 0000

DIRECTOR: CONTACT LABORATORY
IF YOU HAVE ANY QUESTIONS CONTACT BRANCH: 000 652 3324 LAB: 001 302 9750
LAST PAGE OF REPORT

PHS0331

5-100

KILBY CORRECTIONAL FACILITY
PO BOX 11
MT. MEIGS, AL 36057

PATIENT NAME

Clackler, Debra

PRISON ID

159516

DATE SUBMITTED

4-6-00

Tut #49 4-7

TEST NAME	RESULT	REFERENCE RANGE	COMMENTS
HIV ANTIBODY		NEGATIVE (NEG)	
RPR	✓ <u>NR</u>	NON-REACTIVE (NR)	
URINALYSIS			
APPEARANCE			
pH		pH 5- pH 6	
PROTEIN		NEGATIVE (NEG)	
GLUCOSE		NEGATIVE (NEG)	
KETONES		NEGATIVE (NEG)	
BILIRUBIN		NEGATIVE (NEG)	
BLOOD		< 5 RBC/MCL	
NITRITE		NEGATIVE (NEG)	
UROBILINOGEN		< 1.0 MG/DL	
LEUK. ESTERASE		NEGATIVE (NEG)	
SPECIFIC GRAVITY		1.016-1.022	

mp
4/12/00

4/10/00

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Specimen #	Type	Primary	Report Status	PG
111-905-2550-0	S	MB	FINAL	PG 1
Additional Information				
SRC-VAGINAL 1DNA			DOB: 06/26/68	
Patient Name		Sex	Age (Yr/Mos)	
CLAY, DEBORAH		F	030/09	
Patient Address				
Date Collected	Date Entered	Date Reported		
04/21/99	04/21/99	04/22/99	5802	

Clinical Information		04/22/99	17:01
Physician ID	Patient ID		
GREEN	146130		
Account			
TUTWILER PRISON FOR WOMEN		013030	
CORRECTION MEDICAL SERVICES		03	
8966 U.S. HIGHWAY 231		03	
WETUMPKA, AL 36092-			
334-567-6217			

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
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CHLAMYDIA/GONOCOCCUS DNA PROBE

Chlamydia, DNA Probe

NEGATIVE for Chlamydia trachomatis by DNA Probe.
Test valid for male urethral, female endocervical
and ocular specimens only.

N gonorrhoeae by DNA Probe

NEGATIVE for Neisseria gonorrhoeae by DNA Probe.

Note: Test valid for male urethral and female
endocervical cervical specimens only

LAB: MB LABCORP BIRMINGHAM

DIRECTOR: CONTACT LABORATORY

1801 FIRST AVENUE SOUTH BIRMINGHAM, AL 35233-0000

DIRECTOR: CONTACT

LABORATORY

IF YOU HAVE ANY QUESTIONS CONTACT - BRANCH: 800-659-3324 LAB: 205-581-3500
LAST PAGE OF REPORT

PHS0333

REPORT

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Specimen #	Type	Print	Report Status
091-C80-0016-0	Additional Information	BA	FINAL PG
CO-PSC9935966		DOB: 11/26/54	
Patient Name		Sex	Age (Yr/Mos)
CLACKER, DEBRA		F	044/04
Date Collected	Date Entered	Date Reported	
03/29/99	04/01/99	04/08/99	5594

Clinical Information		04/08/99 13:25
Physician ID	Patient ID	
KAPUR	159516	
Account		
TUTWILER PRISON FOR WOMEN		013030
CORRECTION MEDICAL SERVICES		03
8966 U.S. HIGHWAY 231		03
WETUMPKA, AL 36092-		
334-567-6213 ALY		

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
-------	--------	------	-------	--------------------	-----

GYN REPORT

TEST ORDERED:
GYNECOLOGICAL SMEAR (1 SLIDE)
Number of Slides = 1

CLINICAL HISTORY:
SWAB/SPATULA
VAGINAL, CERVICAL AND ENDOCERVICAL

DIAGNOSIS:
WITHIN NORMAL LIMITS.

SPECIMEN ADEQUACY:
SATISFACTORY FOR EVALUATION BUT LIMITED BY LACK OF PERTINENT CLINICAL HISTORY (AGE AND/OR LAST MENSTRUAL PERIOD).

ADDITIONAL COMMENTS:
NO ENDOCERVICAL COMPONENT IS PRESENT.

PERFORMED BY:
MARGARET GOODS, CT(ASCP)

QC REVIEW:
ELIZABETH HUGHINS, CT(ASCP), CT(IAC), SUPERVISOR
PAP SMEAR (1 SLIDE), GYN

THE PAP SMEAR IS A SCREENING TEST DESIGNED TO AID IN THE DETECTION OF PREMALIGNANT AND MALIGNANT CONDITIONS OF THE UTERINE CERVIX. IT IS NOT A DIAGNOSTIC PROCEDURE AND SHOULD NOT BE USED AS THE SOLE MEANS OF DETECTING CERVICAL CANCER. BOTH FALSE-POSITIVE AND FALSE-NEGATIVE REPORTS DO OCCUR.

LAB: MB LABCORP BIRMINGHAM DIRECTOR: CONTACT LABORATORY
1801 FIRST AVENUE SOUTH BIRMINGHAM, AL 35233-0000

LAB: JG LABCORP JACKSON DIRECTOR: WEYMOUTH CROWELL MD
1935 LAKELAND DRIVE JACKSON, MS 39216-0000

LAB: BA LABCORP BIRMINGHAM DIRECTOR: CONTACT LABORATORY
1801 FIRST AVENUE SOUTH BIRMINGHAM, AL 35233-0000

PHS0334

REPORT

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Specimen #	Type	Primary Lab	Report Status
090-205-0095-0	S	MB	FINAL PG
Additional Information			
DOB: 11/26/54			
Patient Name	Sex	Age (Yr/Mos)	
CLACKER, DEBRA	F	044/04	
Patient Address			
Date Collected	Date Entered	Date Reported	
03/31/99	03/31/99	04/02/99	5491

Clinical Information		04/02/99 07:00
Physician ID	Patient ID	
KAPUR	159516	
Account		
TUTWILER PRISON FOR WOMEN		013030
CORRECTION MEDICAL SERVICES		03
8966 U.S. HIGHWAY 231		03
WETUMPKA, AL 36092--		
334-567-6213 ALY		

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Cholesterol, Total	193		mg/dL	100 - 199	

LAB: MB LABCORP BIRMINGHAM DIRECTOR: CONTACT LABORATORY
1801 FIRST AVENUE SOUTH BIRMINGHAM, AL 35233-0000

DIRECTOR: CONTACT LABORATORY
IF YOU HAVE ANY QUESTIONS CONTACT - BRANCH: 800-659-3324 LAB: 205-581-3500
LAST PAGE OF REPORT

4/2/99

[Signature]

PHS0335

U/A DIPSTICK REPORT

1: Clicker, Debra AIS# 159516 R/S W F3: 11-26-54 AGE: 45Collection Date: 3-28-89 TIME _____

Annual Physical _____ Random _____ Repeat _____ Daily _____

After Rx. Completion _____ Chronic Care Clinic Protocol _____

Urine Appearance: Color Yell Clarity: Clear Odor: GSpecific Gravity: 1.020PH: 5LEUKOCYTES: GNITRATE: GPROTEIN: GGLUCOSE: NoneKETONES: GUROBILINOGEN: NoneBILIRUBIN: GBLOOD: G HEMOGLOBIN: GWNL: ✓ ABNORMAL _____OBTAINING NURSE'S SIGNATURE: [Signature] 3/28/89 DateREVIEWING PHYSICIAN's Signature: [Signature] 3/29/89 Date

LabCorp®

113-C80-0149-0	Type S	Primary BA	Report Status FINAL	PG 1
CO-PSC9835923		DOB: 11/26/54		
Patient Name CLOCKER, DEBRA		Sex F	Age (Yr/Mos) 043/05	
Patient Address				
Date Collected 04/16/98	Date Entered 04/23/98	Date Reported 04/24/98	0040	

Clinical Information		04/24/98	16:57
Physician ID KAYFON	Patient ID 159516		
Account			
TUTWILER PRISON FOR WOMEN		0130303	
CORRECTION MEDICAL SERVICES		03	
8966 U.S. HIGHWAY 231		03	
WETUMPKA, AL 36092-			
334-567-6213		ALY	
FLAG	UNITS	REFERENCE INTERVAL	LAB

GYN REPORT

TEST ORDERED:
GYNECOLOGICAL SMEAR (1 SLIDE)
Number of Slides = 1

CLINICAL HISTORY:
PREVIOUS NEGATIVE CYTOLOGY
NO GYNECOLOGICAL SOURCE IDENTIFIED.

DIAGNOSIS:
WITHIN NORMAL LIMITS. ✓

SPECIMEN ADEQUACY:
SATISFACTORY FOR EVALUATION BUT LIMITED BY LACK OF PERTINENT CLINICAL
HISTORY (AGE AND/OR LAST MENSTRUAL PERIOD).

ADDITIONAL COMMENTS:
ENDOCERVICAL COMPONENT IS PRESENT.

PERFORMED BY:

DEBRA WARREN, CT (ASCP)

LAB: MB LABCORP HOLDINGS

1801 FIRST AVENUE SOUTH BIRMINGHAM, AL 35233-0000

DIRECTOR: CONTACT LABORATORY

DIRECTOR: CONTACT LABORATORY

IF YOU HAVE ANY QUESTIONS CONTACT - BRANCH: 800-659-3324 LAB: 800-621-8037

LAST PAGE OF REPORT

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4/27/98

PHS0337

REPORT

NAME <u>Blackler, Debra</u>		Middle Initial <u>S</u>	
AUS <u>159516</u>		Date Requested <u>6/1/06</u>	
PRISON NUMBER <u>22 F</u>		Date Collected <u>6/1/06</u>	
LOCATION <u>Unit 1</u>		Date Reported <u>6/1/06</u>	
LOCATION REPORT <u>Unit 1</u>		TEST REQUESTED <u>UA</u>	
SPECIFIC GRAVITY <u>1.050</u>		SERVICE CODE	
PH <u>6</u>			
LEUKOCYTE <u>0</u>			
NITRITE <u>0</u>			
PROTEIN <u>0</u>			
GLUCOSE <u>0</u>			
KETONES <u>0</u>			
UROBILINOGEN <u>0</u>			
BILIRUBIN <u>0</u>			
BLOOD <u>3+</u>			
COLOR <u>cloudy</u> <u>Amber, red</u>			
Technician		Date	
Department			

LABORATORY MISCELLANEOUS

Franklin

RT

KILBY CORRECTIONAL FACILITY
PO BOX 11
MT. MEIGS, AL 36057

PATIENT NAME

Cletcher Debra

PRISON ID

159514

DATE SUBMITTED

3-19-97

EMC47320

TEST NAME	RESULT	REFERENCE RANGE	COMMENTS
HIV ANTIBODY		NEGATIVE (NEG)	
RPR	NR	NON-REACTIVE (NR)	
URINALYSIS			
APPEARANCE	Annual		
pH		pH 5- pH 6	
PROTEIN		NEGATIVE (NEG)	
GLUCOSE		NEGATIVE (NEG)	
KETONES		NEGATIVE (NEG)	
BILIRUBIN		NEGATIVE (NEG)	
BLOOD		< 5 RBC/MCL	
NITRITE		NEGATIVE (NEG)	
UROBILINOGEN		< 1.0 MG/DL	
LEUK. ESTERASE		NEGATIVE (NEG)	
SPECIFIC GRAVITY		1.016-1.022	

3/26/97

Pathcare
201 Beacon Parkway West
Suite 206
Birmingham, AL 35209
Phone (205) 945-6040

Patient: CLACKLER, DEBRA
Doctor : GUEST

L4038

9715786

TUTWILER PRISON FOR WOMEN
CORRECTIONAL MEDICAL SERV
8966 U.S HIGHWAY 231
WETUMPKA, ALABAMA 36092

REQ:
LOG: 3/20/1997
REP: 03/20/97
ROUTE: I
PHONE: 1-334-567-4369

Age/Sex: 112654/F
Coll. Date: 03/19/97 at 10:46 AM

CYTOLOGY

CLINICAL INFORMATION:

LMP: 2/97

CURRENT CLINICAL INFORMATION: ONE SLIDE RECEIVED LABELED AND INTACT

SOURCE OF SPECIMEN: PAP SMEAR

PAP SMEAR REPORT: CLASS I — NEGATIVE

SATISFACTORY FOR EVALUATION
HORMONAL PATTERN CONSISTENT WITH AGE AND HISTORY

WITHIN NORMAL LIMITS
MILD REACTIVE CHANGES

PATHOLOGIST: C. JOYCE GREATHOUSE, M.D.
CYTOTECHNOLOGIST: L. WHITLOW, C.T.(ASCP)

Jf 25
May
97

Test performed by NORWOOD CLINIC LABORATORY, 1528 CARRAWAY BLVD., Birmingham AL 35234

3/25/97

NAME: <u>Chickens, Debra</u>		ROUTINE	
R/S	Last <u>WT</u> First	Date Requested <u>3/19/97</u>	By <u>[Signature]</u>
PRISON NUMBER <u>159516</u>		Date Collected <u>3/19/97</u>	By <u>[Signature]</u>
LOCATION <u>BMC</u>		Date Reported <u>3/19/97</u>	By <u>[Signature]</u>
DOCTOR REPORT	<u>Quest</u>	TEST REQUESTED <u>ur/ur</u>	SERVICE CODE
Leukocytes <u>neg</u> Nitrite <u>neg</u> Urobilinogen <u>neg</u> Protein <u>neg</u> pH <u>5</u> Blood <u>neg</u> specific GRAVITY <u>1.025</u> Ketones <u>neg</u> Bilirubin <u>neg</u> Glucose <u>neg</u> color <u>yellow</u>			
Technician	Date <u>3/19/97</u>	Department	STAT <input type="checkbox"/> OUTPATIENT <input type="checkbox"/> 20 May 97

LABORATORY MISCELLANEOUS

F-27

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04/06/96 06:51

SPECIMEN ID 096-205-0485-0		TYPE S	STATUS FINAL	PG 1
ADDITIONAL INFORMATION				
DOB: 11/26/54			CD- 50666192973	
PATIENT NAME CLACKLER, DEBRA		SEX F	AGE (YR./MON.) 041/04	
PT. ADD.				
DATE OF SPECIMEN 04/05/96	DATE ENTERED 04/05/96	DATE REPORTED 04/06/96	0939	

CLINICAL INFORMATION	
PHYSICIAN ID. GUEST	PATIENT ID. 159516
ACCOUNT TUTWILER PRISON FOR WOMEN 013030 CORRECTION MEDICAL SERVICES 03 3966 U.S. HIGHWAY 231 03 WETUMPKA, AL 36092- 334-567-4369 ALY	

TEST	RESULT	LIMITS	TEST SITE ON BACK
------	--------	--------	----------------------

DIRECTOR: JAMES A DAVIS III MD
 IF YOU HAVE ANY QUESTIONS CONTACT - BRANCH: 800-659-3324 LAB: 800-621-8037
 LAST PAGE OF REPORT

FOLD

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3RD QUARTER 1995

PHS0342

REPORT

159516

RA

04/06/2006 01:19:45 PM (11:58:00 AM)
04/06/2006 01:19:45 PM (11:58:00 AM)
04/06/2006 01:19:45 PM (11:58:00 AM)

[Handwritten signature]

NAME: <i>Jacklin, Robert</i>		Last <i>W F</i>		First		Middle Initial		ROUTINE <input checked="" type="checkbox"/> STAT <input type="checkbox"/> OUTPATIENT <input type="checkbox"/>	
PRISON NUMBER <i>159516</i>		Date Requested <i>4/2/96</i>		By		Date Collected <i>4/2/96</i>		By	
LOCATION <i>Det.</i>		Date Reported <i>4/2/96</i>		By					
DOCTOR REPORT <i>Wheat</i>		TEST REQUESTED		SERVICE CODE					
SPECIFIC GRAVITY <i>1.010</i>									
PH <i>5</i>									
LEUKOCYTE <i>N</i>									
NITRITE <i>N</i>									
PROTEIN <i>N</i>									
GLUCOSE <i>N</i>									
KETONES <i>N</i>									
UROBILINOGEN <i>N</i>									
BILIRUBIN <i>N</i>									
BLOOD <i>N</i>									
COLOR <i>straw</i>									
Technician		Date		Department					

LABORATORY
MISCELLANEOUS

F-27

NAME <i>Blackburn, Melba</i>		First		Middle Initial		<input checked="" type="checkbox"/> ROUTINE <input type="checkbox"/> STAT <input type="checkbox"/> OUTPATIENT	
R/S <i>WFE</i>		Date Requested		By			
PRISON NUMBER: <i>1595-16</i>		Date Collected		By			
LOCATION <i>Detention</i>		Date Reported		By			
DOCTOR <i>Stewart</i>		TEST REQUESTED		By			
REPORT		SERVICE CODE					
TECHNICIAN		Date		Department			
SPECIFIC GRAVITY		<i>1.020</i>					
PH		<i>5</i>					
LEUKOCYTE		<i>+1</i>					
NITRITE		<i>0</i>					
PROTEIN							
GLUCOSE							
KETONES							
UROBILINOGEN							
BILIRUBIN							
BLOOD							
COLOR						<i>Amber</i>	

LABORATORY MISCELLANEOUS

F-27

Annuals

201-393-5000
800-631-1390 Client Service

**Laboratory
Report**

Joseph E. O'Brien, M.D.
JOSEPH E. O'BRIEN, M.D.

Charlene S. Polan, M.D.
CHARLENE S. POLAN, M.D.

Patient Name

CLACKER, DEBRA

01313

Date Drawn

06/03/94

Date Received

06/08/94

Date of Report

06/16/94

Sex

Age

AJ

Client Name / Address

TUTWILER PRISON FOR WOMEN

AJ

I.D. Number

Account Number

40595

2

Referring Physician

MENDEZ
159516RT#1 BOX 33 1400 HWY 23IN
WETUMPKA AL 36092

C.L.I.A. # 31D0696246

Specimen Number

74615P

Time Drawn

Patient ID / Specimen Number

CLIENT INFO: ANNUAL

TEST NAME

CYTOLOGY-FEM GENITAL

RECEIVED 1 SLIDE(S) WITH PATIENT IDENTIFICATION
SITE(S): VAGINAL CERVICAL ENDOCERVICAL

- FINDINGS

SPECIMEN ADEQUACY

SATISFACTORY. HOWEVER, INTERPRETATION
IS LIMITED BY THE FOLLOWING:
ENDOCERVICAL COMPONENT (COLUMNAR AND/OR METAPLASTIC CELLS)
SEEN.
OTHER: SEE ADDITIONAL COMMENT(S) BELOW.

GENERAL CATEGORIZATION

WITHIN NORMAL LIMITS: EPITHELIAL
* EVIDENCE OF INFECTION: SEE COMMENT(S) *

DESCRIPTIVE COMMENT(S)

(MICROORGANISMS)

NO TRICHOMONAS PRESENT.
* CANDIDA SPECIES ARE PRESENT. *

OTHER COMMENT(S)

NUMEROUS WHITE BLOOD CELLS PRESENT.

* * * * *
PATIENT AGE AND/OR DATE OF LMP NOT PROVIDED.
* * * * *

CYTOTECHNOLOGIST: GRACE PALOMARES, C.T. (ASCP)

6-17-94